

Please type a plus sign (+) inside the box →

PTO/SB/10 (8-95)
Approved for use through 9/30/98. GMB 0551-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid GMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR Declaration Submitted after with Initial Filing

Attorney Docket Number	102.174
First Named Inventor	LE GAL et al.
COMPLETE IF KNOWN	
Application Number	PCT/FR99/00792
Filing Date	April 6, 1999
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LIPopeptides inducing T lymphocytic cytotoxicity bearing at least one auxiliary T epitope, and uses for vaccination

(Title of the Invention)

The specification of which

is attached hereto
OR

was filed on (MM/DD/YYYY) **04/06/99** as United States Application Number or PCT International

Application Number

PCT/FR99/00792

and was amended on (MM/DD/YY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
98 04323	France	04/07/98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	
PCT/FR99/00792	PCT	04/06/99	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Please type a plus sign (+) inside this box →

Approved for use through 9/20/98 GMB 0651-0922
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid CFB control number.

DECLARATION

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Bierman, Muserlian and Lucas	18,818		
Jordan B. Bierman	18,629		
Charles A. Muserlian	19,683		
Donald C. Lucas	31,275		

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	Charles A. Muserlian		
Address	Bierman, Muserlian and Lucas		
Address	600 Third Avenue		
City	New York	State	NY
Country	U.S.A.	Telephone	(212) 661-8000
		Fax	(212) 661-8002

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Frederique Anne	Middle Initial	Family Name	LE GAL			Suffix e.g. Jr.
Inventor's Signature					Date		
Residence: City	Vincennes	State	Country	France	Citizenship	France	
Post Office Address	21 rue de Donjon, 94300 Vincennes, France						
Post Office Address							
City	Vincennes	State	Zip	F-94300	Country	France	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Type a plus sign (+) inside this box →

PRO/SER: (P-96)

Approved for use through 9/30/96 OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Jean Gerard	Middle Initial		Family Name	GUILLET	Suffix e.g. Jr
Inventor's Signature					Date	
Residence: City	Vanves	State		Country	France	Citizenship France
Post Office Address	39 rue Raphael, 92170 Vanves, France					
Post Office Address						
City	Vanves	State		Zip F- 92170	Country	France
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Hanne	Middle Initial		Family Name	GAHERY-SEGARD	Suffix e.g. Jr
Inventor's Signature					Date	
Residence: City	Paris	State		Country	France	Citizenship France
Post Office Address	14 rue Sauvette, F-75014 Paris, France					
Post Office Address						
City	Paris	State		Zip F- 75014	Country	France
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Heleine	Middle Initial		Family Name	GRAS-MASSE	Suffix e.g. Jr
Inventor's Signature					Date	
Residence: City	Merignies	State		Country	France	Citizenship France
Post Office Address	321 rue de la Rosiere, F-59710 Merignies, France					
Post Office Address						
City	Merignies	State		Zip F- 59710	Country	France
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Oleg	Middle Initial		Family Name	MELNYK	Suffix e.g. Jr
Inventor's Signature					Date	
Residence: City	MONS-en-BAROEUL	State		Country	France	Citizenship France
Post Office Address	9, rue Gabriel Peri, F-59370 MONS-en-BAROEUL, France					
Post Office Address						
City	MONS-en-BAROEUL	State		Zip F- 59370	Country	France
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto						

Please type a plus sign (+) inside this box →

PTO/SB-01 (8-96)
Approved for use through 9/30/98. GMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid GMB control number.

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Andre	Middle Initial		Family Name	TARTAR	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	VITRY-en-ARTOIS	State		Country	France	Citizenship	France
Post Office Address	1 rue du Marlin, 62490 VITRY-en-ARTOIS, France						
Post Office Address							
City	VITRY-en-ARTOIS	State		Zip	F-62490	Country	France
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							